

USA Today: Troops' care facility listed as critical

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By Gregg Zoroya, USA TODAY WASHINGTON — The Pentagon effort to consolidate two premier hospitals for treating wounded troops has more than doubled in price and is so rudderless that an independent review and a bipartisan group of legislators say the care could suffer. The cost of closing Walter Reed Army Medical Center, replacing it with a larger complex at the National Naval Medical Center in Bethesda, Md., and building a hospital at Fort Belvoir, Va., has risen from \$1 billion to \$2.6 billion, Pentagon records show.

Correcting the problems raised by Congress will cost another \$781 million, according to a Pentagon report released Monday. And improvements must wait until after the new Bethesda facility — named the Walter Reed National Military Medical Center — is finished in September 2011, the report says. **MERGER:** See plans for new facility **LETTER:** Congressional members, military surgeon generals concerned **READ:** World Class Military Medical Facilities Act **RESULTS:** Independent review of plan The independent review last year found that, without improvements, the center would lack an adequate number of operating rooms and some would be too small to accommodate the latest surgical technology. There would not be enough single-patient rooms, critical for controlling infections.

The center will not be "world-class" as Congress envisioned, legislators say. "Wounded warrior care will suffer," they wrote to the Pentagon in a January letter made public last week. A key problem is that no one person is in charge of the project, according to the review done by a panel of the advisory Defense Health Board. "(It's) a very simple issue. Someone has to be in charge," Kenneth Kizer, a former Department of Veterans Affairs official who led the review, told Congress last year.

In an interview last week, the Pentagon's top medical officer denied that care of troops will suffer at the new center. "We will never let that happen," says Dr. Charles Rice, temporarily assigned as assistant secretary of defense for health affairs. "We are going to achieve a facility for which the nation can be justifiably proud." Rice said the Pentagon is giving broader operational control over the project to its current commander, Navy Vice Adm. John Mateczun. But Rice said many upgrades suggested by Kizer's committee will have to wait until after consolidation is finished, because the Navy hospital must continue to operate while current construction is underway. "I think the Air Force metaphor would be building the airplane while flying it," Rice says, adding that the Pentagon is committed to finishing consolidation of the two hospitals by the congressionally mandated deadline of September, 2011. A master plan for the project submitted to Congress Monday says the issues raised by Congress and the independent review will be addressed. "The project include completing conversion to single-patient rooms and replacing and renovating older structure on the campus."

The Pentagon said it will provide in December a plan for when these improvements will be done. A bill introduced last

month by a bipartisan group of House Armed Services Committee members would place the deputy Defense secretary, William Lynn, in charge of the project. It would also budget another \$400 million to make the new complex in Bethesda a "world-class medical facility."

In 2007, Walter Reed was rocked by scandal over poor care of wounded troops, and lawmakers said they don't want that to happen again. "Our concerns need to be addressed," says Rep. Joe Wilson, R-S.C., a co-author of the bill that would reorganize the project's management. "We would prefer that the Department of Defense come up with its own solution to ensure that we see a world-class center," Rep. Susan Davis, D-Calif, said. "But until we have the confidence that's going to happen, Congress will need to take action."